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Carol Felenstein

*Carol Felenstein*

Docket No. 3499-24

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
PATENT OPERATION

Assistant Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application under 37 CFR 1.53(b):

Applicants : Mancini, et al.

For : **ONLINE SALES RISK MANAGEMENT SYSTEM**

This application claims the benefit of provisional application entitled "Retail System Currency Exchange," filed January 31, 2000, bearing the Serial No. 60/179,373 the contents of which are relied upon and incorporated by reference.

Enclosed are:

- ☒ Specification - 20 pages; Claims - 5 pages; Abstract.
- ☒ Declaration, Power of Attorney unsigned
  - ☐ Newly executed (original or copy)
  - ☐ Copy from a prior application (for continuation/divisional)
- ☒ (7) sheets of ☒ formal ☐ informal drawings (comprising of Figures 1 through 7).
- ☐ Assignment to
- ☐ Assignment Recordation Cover Sheet

- ☐ Enclosed is a check in the amount of \$40.00 to cover the Assignment Recordation Fee
- ☐ Small Entity Status Declaration
- ☐ Preliminary Amendment

### CLAIMS AS FILED

	Number Filed	Number Extra	Rate	Additional Fee	Basic Fee \$690.00
Total Claims	36-20	16	X \$ 18.00	X \$288	= \$288
Independent Claims	10-3	7	X \$ 78.00	X \$546	= \$546
First Presentation of Multiple dependent Claims			+\$260.00		= \$
Total Filing Fee					\$1524.00

- ☐ Certified Copy of priority documents, claimed herein.

**Applicant hereby claims priority under the International Convention and under 35 USC § 119 based upon the following:**

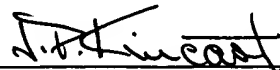
Patent Application Serial No. , filed .

- ☐ Information Disclosure Statement, Form PTO 1449, References
- ☐ If a continuing application, check appropriate box
- ☐ Continuation ☐ Divisional
- ☐ Continuation-in-part (CIP)
- ☐ A check in the amount of \$ to cover the filing fee and any additional claim fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge the required fee for the submission of the patent application, or any additional fees or credit any overpayments in connection with this application to Deposit Account No. 50-0521. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

**MAILING ADDRESS**

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